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## NEVADA FINANCIAL DISCLOSURE STATEMENT (FDS)

(Please read the instructions before completing.)

COMMISSION  
ON ETHICS

## PERSONAL INFORMATION:

NAME: <u>Ross Rivera</u>	LENGTH OF RESIDENCE IN NEVADA: <u>51 years</u>
ADDRESS: <u>1175 Ave L</u>	
CITY, STATE, ZIP: <u>Ely Nevada</u>	LENGTH OF RESIDENCE IN DISTRICT WHERE REGISTERED TO VOTE (NRS 281A.620(1)(a)): <u>29 y</u>
TELEPHONE: <u>775-289-3614</u>	E-MAIL: <u>elyvfd@mwpower.net</u>

**SECTION A (Public Office):** List all public offices for which this financial disclosure statement is required [NRS 281A.620.1(g)] and check each box accordingly i.e. annual, candidate or appointment filing:

- **ANNUAL** all elected and appointed public officers (no later than Jan. 15 each year)
- **CANDIDATE** (no later than the 10<sup>th</sup> day after the last day to qualify as a candidate)
- **APPOINTMENT** to fill unexpired term of an elected or appointed public officer (within 30 days)

Public Office	Elected, Appointed or Appointed to Elective (E, A or A/E)	Annual Compensation	Term or Date Appointed	ANNUAL	CANDIDATE	APPOINTMENT
				NRS 281A.600.1(b) 281A.610.1(b)	NRS 281A.610.1(a)	NRS 281A.600.1(a)
<u>City of Ely Fire Chief</u>		<u>\$58,279.45</u>	<u>11/1/2000</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		\$		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		\$		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**SECTION B (Sources of Income):** List each source of your income (including any source listed in Section A), or that of any member of your household who is 18 years of age or older. [NRS 281A.620.1(b)]:

	Self	Household Member
<u>City of Ely</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<u>A Cut Above</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<u>Breed Dist Inc</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>

**SECTION C (Real Property):** List specific location and particular use of all real estate (other than personal residence): (1) in which you or a member of your household has a legal or beneficial interest; (2) the fair market value of which is \$2,500 or more; and (3) located in this state or an adjacent state [NRS 281A.620.1(c)]:

Specific Location	Particular Use
<u>NONE</u>	

Print Name of Public Officer

**SECTION D (Creditors):** List each creditor to whom you or a member of your household owes \$5,000 or more [EXCEPT: (1) debt secured by mortgage or deed of trust on real property which is not required to be listed in Section C above; and (2) debt for which a security interest in a motor vehicle for personal use was retained by seller] [NRS 281A.620.1(d)]:

Self Household Member

<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

**SECTION E (Gifts):** List the identity of donor and value of each gift of all gifts received in excess of an aggregate value of \$200 from a donor during the preceding taxable year [EXCEPT: (1) a gift received from a person who is related to you within the third degree of consanguinity or affinity; and (2) ceremonial gifts received for a birthday, wedding, anniversary, holiday or other ceremonial occasion if the donor does not have a substantial interest in your legislative, administrative, or political action] [NRS 281A.620.1(e)]:

Donor

Gift

Value of Gift

<u>None</u>	\$
	\$
	\$
	\$

**SECTION F (Business Entities):** List each business entity (i.e., organization or enterprise operated for economic gain, including a proprietorship, partnership, firm, business, trust joint venture, syndicate, corporation or association) with which you or a member of your household is involved as a trustee, beneficiary of a trust, director, officer, owner in whole or in part, limited or general partner, or holder of a class of stock or security representing 1% or more of the total outstanding stock or securities issued by the business entity [NRS 281A.620.1(f)]:

Self Household Member

<u>A Cut Above (Expense)</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>

THE INFORMATION I HAVE PROVIDED HEREIN IS ACCURATE AND COMPLETE.

Date: 12/1/08Signature: [Signature]Print name: Ross Rivera

## FILE COMPLETED FORM WITH:

Appointed Public Officers  
Nevada Commission on Ethics  
3476 Executive Pointe Way, Suite 10  
Carson City, Nevada 89706  
775.687.5469 • 775.687.1279 fax

Elected Public Officers and Candidates for Public Office  
Nevada Secretary of State, Elections Division  
101 North Carson Street, Suite 3  
Carson City, Nevada 89701  
775.684.5705 • 775.684.5718 fax